

Katrina: Lessons Learned in a Local Response

Rhode Island Medical Reserve Corps

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Program Coordinator

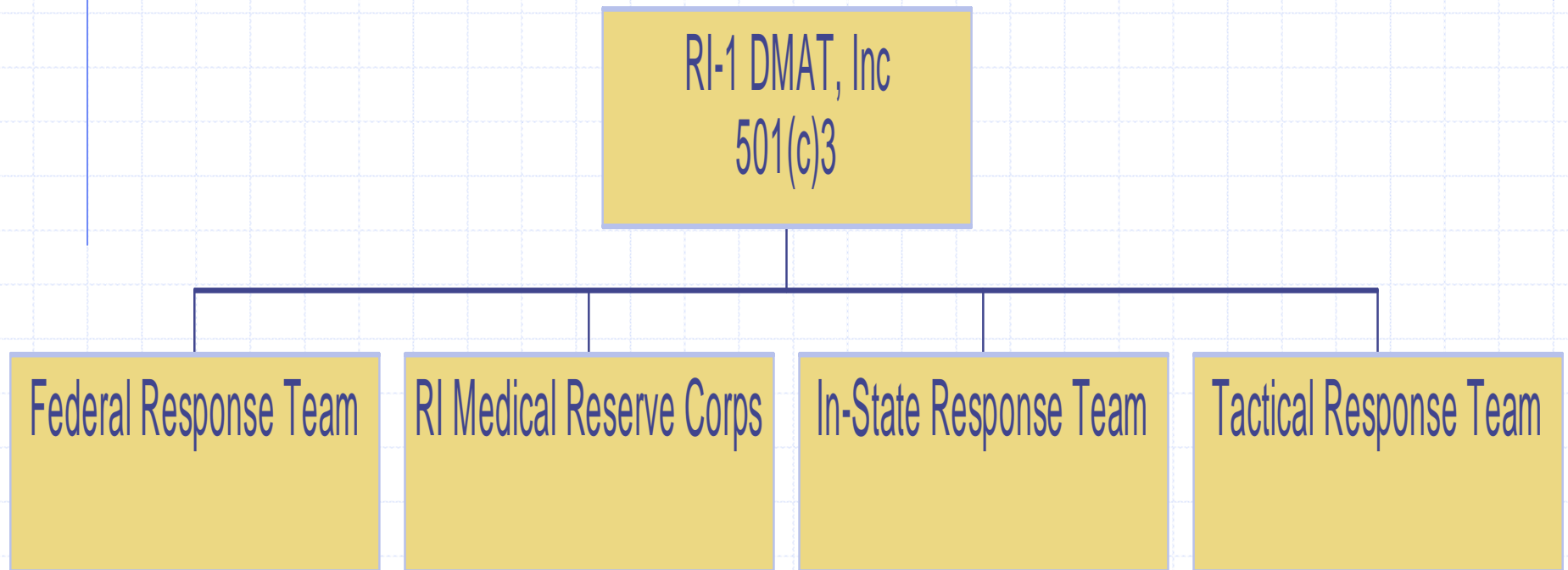


Narrative Objectives

- ◆ Discuss relationship of Host Organization, RI-1 DMAT to RI MRC
- ◆ List the major components of our local response
- ◆ Identify successes and opportunities for improvement in the establishment of our clinic



Rhode Island Disaster Medical Assistance Team Inc.

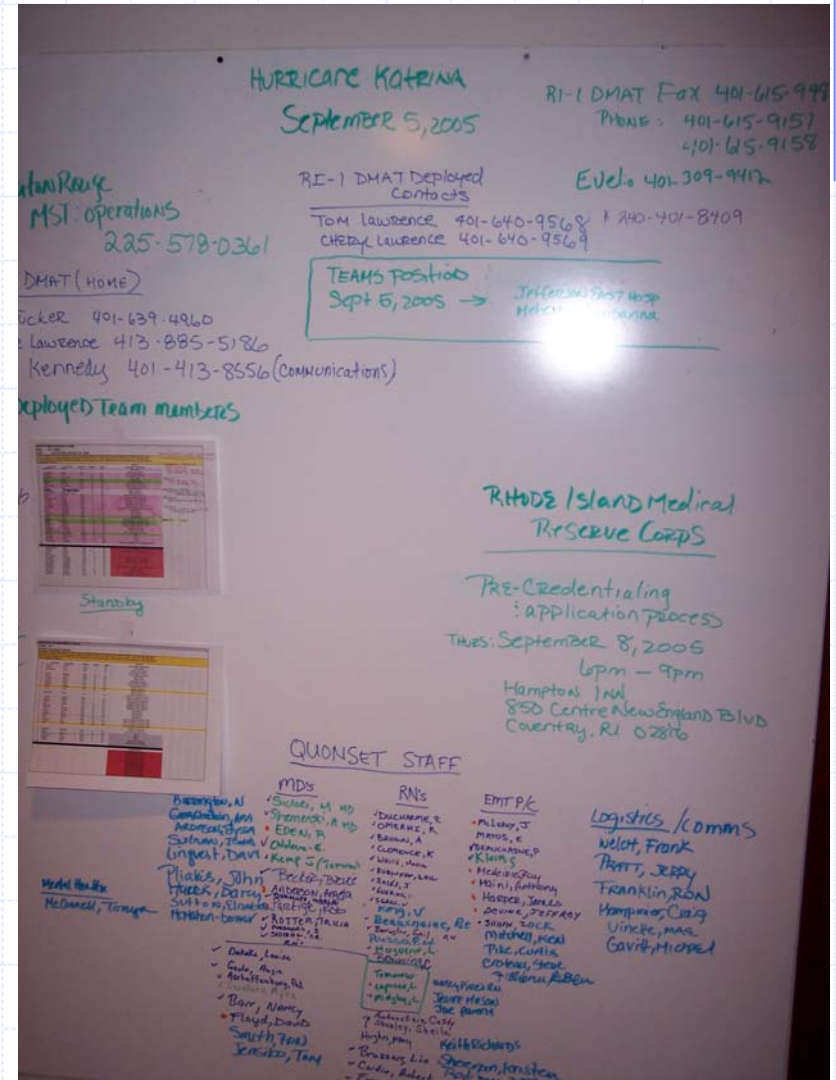


Major Components of the Response

- ◆ Pre-planning (with short notice)
- ◆ Initial response
- ◆ Reception and triage of arrivals
- ◆ Middletown Clinic
- ◆ Final Paperwork

Pre planning

- ◆ Notification of arrival
- ◆ Logistics
- ◆ Volunteer recruitment & orientation
- ◆ Field hospital set up
- ◆ (Note the lack of clinic planning)







Initial response

- ◆ Response & Set-up
- ◆ Evacuees arrival
- ◆ Initial triage
- ◆ Medical screening
- ◆ Clinic Planning





Clinic

- ◆ Staffing/logistics
- ◆ Morning rounds
- ◆ Follow up
- ◆ Wrap







Aftermath: What worked, what did not....

What worked

- ◆ Patient care
- ◆ Volunteer management
- ◆ State, Town and interagency cooperation
- ◆ Support from local business community

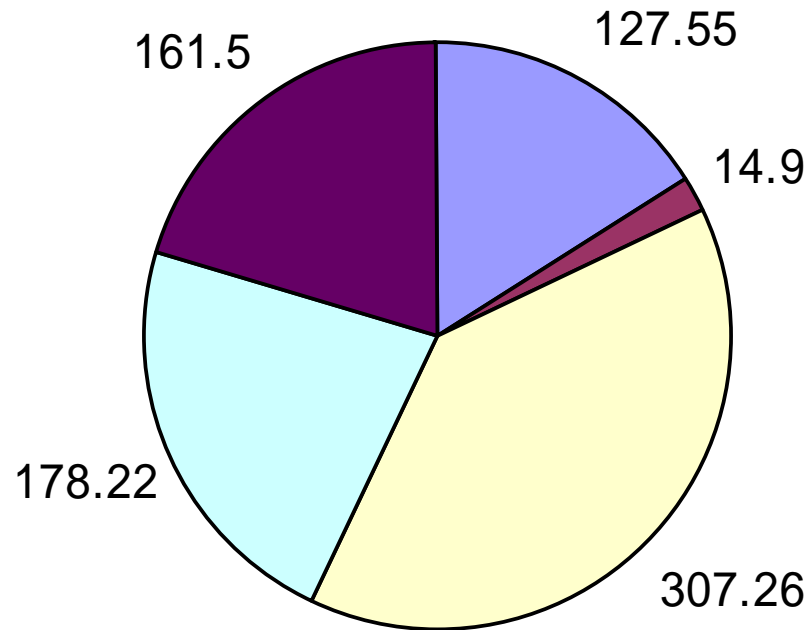
What did not

- ◆ Unified command system uneven
- ◆ Lack of information flow (up and down)
- ◆ Clinic SOPs did not exist, but were improvised as needed

Lessons learned

- ◆ Currently developing SOP for clinic set-up
- ◆ Relationship development with other agencies
- ◆ More training & recruitment

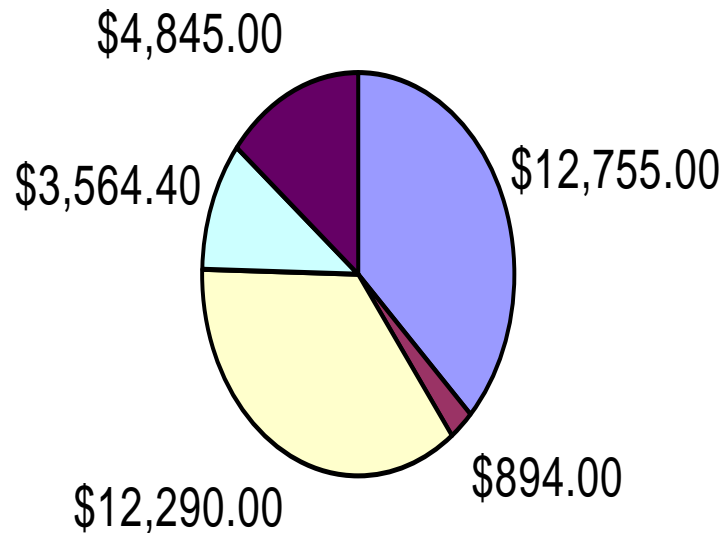
Hours Worked in Middletown clinic



■ Physician Hours ■ Mid Level (NP/PA) ■ Nursing ■ EMS ■ Admin/Logistics

Approximate Value of Services Provided

Value



■ Physician Hours ■ Mid Level (NP/PA) ■ Nursing ■ EMS ■ Administration

**All done with one thing in
mind...**



Questions ?



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Recruitment of Newest Members

